



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.

10/030,830

Applicant

WOLF, ET AL.

Filed

: January 11, 2002

Title

MULTIRATE COCHLEAR STIMULATION STRATEGY AND

APPARATUS

Art Unit

TO BE ASSIGNED

Examiner

TO BE ASSIGNED

Atty Docket No.

COCH-0026-US1

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

The below-identified communication(s) is (are) submitted in the above-captioned application or proceeding:

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Revocation of Power of Attorney with New Power of Attorney and

Change of Correspondence Address.

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Statement under 37 CFR 3.73(b).

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The Commissioner is hereby authorized to charge payment of any fees associated with this communication, including fees under 37 C.F.R. §§ 1.16 and 1.17 or credit any overpayment to **Deposit Account Number 10-0233-COCH-0026-US1.**

Respectfully submitted,

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JAGTIANI + GUTTAG

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May 5, 2004

MAY 0 5 2004

PTO/SB/82 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
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REVOCATION OF POWER OF
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AND

Application Number 10/030,830
Filing Date January 11, 2002
First Named Inventor Wolfe, Joe
Art Unit To be Assigned
Examiner Name To be Assigned
Attorney Docket Number COCH-0026-US1

CHANGE OF CORRESPONDENCE ADDRESS

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR ✓ I hereby appoint the practitioners associated with the Customer Number: 22,506								
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 22,506 OR								
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Address		10363-A Democracy Lane						
Address								
City		Fairfax		State	VA		Zip	22030
Country		United States						
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Name Jayne Andrews, Patent Manager of Cochlear Limited								
Signature	Jayre Andrews			Tolonho	no 1			
Date	3 Hay 2004			Telepho	, ,			5274
signature is requ	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
*Total	of 1form	s are submitted.						

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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TRADENT STATE	EMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Wolfe, et al.	·
Application No./Patent No.: 10/030,830	Filed/Issue Date: January 11, 2002
entitled: Multirate Cochlear Stimulation S	trategy and Apparatus
Cochlear Limited	, a Corporation
Name of Assignee)	(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
tates that it is: . ☑ the assignee of the entire right, title, and in	iterest; or
an assignee of less than the entire right, tit The extent (by percentage) of its ownershing the patent application/patent identified above to	p interest is ———— %
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[] Additional documents in the chain of	of title are listed on a supplemental sheet.
[] Copies of assignments or other documents i [NOTE: A separate copy (i.e., the original as must be submitted to Assignment Division in recorded in the records of the USPTO. <u>See</u>	ssignment document or a true copy of the original document) n accordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below)	
3 May 2004 Date	Jayne Andrews
Date	Typed or printed name
+61 2 9425 5274	
Telephone number	Signature
	Patent Manager of Cochlear Limited Title

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